PTO/S8/22 (12-04)
Approved for use through 07/31/2003, OMB 0551-0031
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ETITION FOR EXTENSION OF TIME UNDER		Dacket Number (Optional)	
F1 2007		92509-3	1
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		First May 2 2001	
optication Number 09/846,781		Filed May 2, 2001	Mahilo Davices
or Software, Devices and Methods Facilitating	Execution of Server-	Side Applications at I	WIDDING CHAICES
rt Unit 2177		Examiner Susan F.	
his is a request under the provisions of 37 CFR 1.130 pplication.			1
he requested extension and fee are as follows (chec	k time period desired e	nd enter the appropriate	e fee below):
•	Fee	Small Entity Fee	_ 1
One month (37 CFR 1.17(a)(1))	\$120	\$60	2
Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
Three months (37 CFR 1.17(e)(3))	\$1020	\$510	\$_510.00
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
Five months (37 CFR 1.17(a)(6))	\$2160	\$1080	S
Applicant claims small entity status. See 37 CFR	1.27.		i
A check in the amount of the fee is enclosed			
Payment by credit card. Form PTO-2038 is			
Payment by credit card. Form 10-2000 is	steems form in this	opolication to a Deno	sit Account.
The Director has already been authorized to	Casaige lees in due	application to a cepe	
The Director is hereby authorized to charge	any fees which may	r ba required, or credi re enclosed a duplicat	t any overpayment, we the copy of this sheet.
Deposit Account Number 19-2548 WARNING: Information on this form may become p			
Provide credit card information and authorization	on PTO-2038.		
,			
I am the applicant/inventor.			
assignee of record of the ent	ire interest. See 37 (FR 3.71.	
Statement under 37 CFR	3.73(b) is enclosed ((Form PTU/SB/86).	
attorney or agent of record. F	Registration Number	41,070	
attorney or agent under 37 C	FR 1.34.	•	
Registration number if acting un	der 37 CFR 1.34		19 100
W / T		Jan	11/05
Signature			Date
Matthew Zischka		416-593-5514	
Typed or printed name		Telep	hone Number
NOTE: Signatures of all the inventors or sesignocs of record of the	antire interest or their repres	antative(s) are required. Subm	it mulliple forms If more than one
Signature is required, see before.			
and the same of th			
F	are submitted.	or marin a benefit by the out	to which is to file (and by the
	formation is required to obtail	n or notein a benefit by the pub 1 and 1.14. This collection is EPTO. Time will yeary dependin	to which is to file (and by the estimated to take 0 minutes to my upon the individual case. Any.

TO: Commissions for Pauling to Form, call 1-800-PTO-0199 and salect option 2.

#you need assistance in completing the form, call 1-800-PTO-0199 and salect option 2.

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